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Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--|---------------------------------------|---|
| 1. Your full name | | |
| Write the name that is or government-issued pictu identification (for exampl | re Austin First Name | First Name |
| your driver's license or passport). | Joshua Middle Name | Middle Name |
| Bring your picture identification to your mee | Williams Last Name | Last Name |
| with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First Name | First Name |
| Include your married or | Middle Name | Middle Name |
| maiden names. | Last Name | Last Name |
| 3. Only the last 4 digits of your Social Security | xxx - xx - <u>0</u> <u>1</u> <u>7</u> | xxx - xx |
| number or federal Individual Taxpayer | OR | OR |
| Identification number (ITIN) | 9xx - xx | 9xx - xx |

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| Debtor 1 Austin Joshua Wil | | ams Ca | | | Case number (if known) | | |
|----------------------------|---|-------------------------------------|----------------------------------|---|------------------------|-------------------|---|
| | | | About Debtor 1: | | | About Debtor 2 | 2 (Spouse Only in a Joint Case): |
| 4. | Any busine | yer | ✓ I have not us | sed any business names or | r EINs. | ☐ I have not | used any business names or EINs. |
| | | on Numbers nave used in rears | Business name | | | Business name | |
| | _ | | Business name | | | Business name | |
| | Include trade names and doing business as names | | Business name | | | Business name | |
| | | | | | | | |
| | | | EIN — | | | EIN – | |
| 5. | Whore you | livo | EIN — | | | EIN | s at a different address: |
| Э. | Where you | live | 4700 Caaula C | | | ii Debioi 2 live: | s at a unierent address. |
| | | | 4720 Seattle St Number Street | 1 | | Number Street | |
| | | | | | | | |
| | | | Saint Louis | MO 63121 | | | |
| | | | City | State ZIP Code | | City | State ZIP Code |
| | | | Saint Louis County | | | County | |
| | | | the one above, fi | ddress is different from ill it in here. Note that the y notices to you at this | | from yours, fill | ailing address is different I it in here. Note that the court otices to you at this mailing |
| | | | Number Street | | | Number Street | |
| | | | P.O. Box | | | P.O. Box | |
| | | | City | State ZIP Code | | City | State ZIP Code |
| 6. | | re choosing | Check one: | | | Check one: | |
| | this distric bankruptcy | | | t 180 days before filing this we lived in this district longo other district. | | petition, I h | ast 180 days before filing this nave lived in this district longer y other district. |
| | | | I have anoth (See 28 U.S | ner reason. Explain. .C. § 1408.) | | | other reason. Explain. .S.C. § 1408.) |
| F | Part 2: | ell the Court Al | oout Your Bankr | uptcy Case | | | |
| 7. | | y Code you | • | brief description of each, srm 2010)). Also, go to the t | | • • | I U.S.C. § 342(b) for Individuals Filing the appropriate box. |
| | are choosi under | ng to me | Chapter 7 | | | | |
| | | | Chapter 11 | | | | |
| | | | Chapter 12 | | | | |
| | | | Chapter 13 | | | | |

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| Deb | Austin Joshua Will | liams | | Case number | (if known) |
|-----|---|-------------------------|--|---|--|
| 8. | How you will pay the fee | | court for more details abordary with cash, cashier's o | out how you may pay. Typically, if | neck with the clerk's office in your local you are paying the fee yourself, you may rney is submitting your payment on your h a pre-printed address. |
| | | | | installments. If you choose this o ling Fee in Installments (Official Fo | otion, sign and attach the Application for rm 103A). |
| | | | By law, a judge may, but than 150% of the official fee in installments). If yo | is not required to, waive your fee, a poverty line that applies to your fai | tion only if you are filing for Chapter 7. and may do so only if your income is less nily size and you are unable to pay the out the Application to Have the Chapter 7 petition. |
| ba | Have you filed for | $\overline{\mathbf{Q}}$ | No | | |
| | bankruptcy within the last 8 years? | | Yes. | | |
| | | Distri | ct | When | Case number |
| | | 5 | | MM / | DD / YYYY |
| | | Distri | ct | When MM / | DD / YYYYY |
| | | Distri | ct | When | Case number |
| 10. | Are any bankruptcy cases pending or being | $\overline{\mathbf{V}}$ | No | | |
| | filed by a spouse who is | | Yes. | | |
| | not filing this case with you, or by a business | Debt | or | | Relationship to you |
| | partner, or by an | Distri | ct | When | Case number, |
| | affiliate? | | | MM / | DD / YYYY if known |
| | | Debt | or | | Relationship to you |
| | | Distri | ct | When | Case number, |
| | | | | MM / | DD / YYYY if known |
| 11. | Do you rent your residence? | | No. Go to line 12. Yes. Has your landlord | obtained an eviction judgment aga | inst you? |
| | | | | | Judgment Against You (Form 101A) |

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| Deb | tor 1 Austin Joshua Willi | ams | | | Ca | ase number (if known) | | |
|-----|--|-------------------------|------------|---|---|---|--------------------------------|-----------------------------------|
| Pa | Report About Ar | ıy Bı | ısine | sses You Own as | a Sole Propriet | tor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | | | Go to Part 4. Name and location of b | ousiness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Name of business, if any Number Street | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | | Single Asset Rea | ness (as defined in al Estate (as defined defined in 11 U.S.C er (as defined in 11 | n 11 U.S.C. § 101(27A) d in 11 U.S.C. § 101(5 ⁷ c. § 101(53A)) | • | ode |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> | can mos | set ap | filing under Chapter 11, propriate deadlines. If nt balance sheet, staten f these documents do n | you indicate that you nent of operations, | ou are a small business cash-flow statement, a | s debtor, you nd federal ir | nust attach your ncome tax return |
| | debtor? | $\overline{\mathbf{V}}$ | No. | I am not filing under C | hapter 11. | | | |
| | For a definition of small business debtor, see | | No. | I am filing under Chap the Bankruptcy Code. | ter 11, but I am NC | DT a small business del | btor accordii | ng to the definition in |
| | 11 U.S.C. § 101(51D). | | Yes. | I am filing under Chap Bankruptcy Code. | ter 11 and I am a s | mall business debtor a | ccording to | the definition in the |
| P | Report If You Ov | vn o | r Hav | e Any Hazardous I | Property or An | y Property That N | eeds Imn | nediate Attention |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable | | No Yes. | What is the hazard? | | | | |
| | hazard to public health or safety? Or do you own any property that needs immediate attention? | | | If immediate attention | is needed, why is i | t needed? | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | Where is the property | Number Street | | | |
| | | | | | City | | State | ZIP Code |

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Debtor 1 Austin Joshua Williams Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. **About Debtor 1:**

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| ☐ I am not require credit counselin | d to receive a briefing about g because of: |
|--|---|
| ☐ Incapacity. | I have a mental illness or a me |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

through the internet, even after I

reasonably tried to do so.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Debtor 1 | | Austin Joshua Willi | iams | | | Case number (if known) | | |
|----------|--|--|-------|--|--------|--|-------|--|
| P | art 6: | Answer These C | luest | ions for Reporting Pเ | ırpos | ses | | |
| 16. | What ki | ind of debts do you | 16a | | - | sumer debts? Consumer de rimarily for a personal, family, | | re defined in 11 U.S.C. § 101(8) usehold purpose." |
| | 16b. | | • | | | | | |
| | | | 16c | State the type of debts yo | ou ow | e that are not consumer or bu | sines | s debts. |
| 17. | Are you Chapte | ı filing under r 7? | | No. I am not filing under | r Chap | oter 7. Go to line 18. | | |
| | any exe exclude adminis are paid availab | estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors? | | • | • | • | - | xempt property is excluded and to distribute to unsecured creditors? |
| 18. | | any creditors do iimate that you | | 1-49 50-99 100-199 200-999 | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. | | uch do you e your assets to th? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | | uch do you se your liabilities to | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |

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| Debtor 1 | Austin Joshua W | illiams | Case number (if known) |
|----------|-----------------|---|--|
| Part 7: | Sign Below | | |
| For you | | I have examined this petition, and I do and correct. | eclare under penalty of perjury that the information provided is true |
| | | • | 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, I understand the relief available under each chapter, and I choose to |
| | | , . | I not pay or agree to pay someone who is not an attorney to help me I and read the notice required by 11 U.S.C. § 342(b). |
| | | I request relief in accordance with the | chapter of title 11, United States Code, specified in this petition. |
| | | ğ , | nt, concealing property, or obtaining money or property by fraud in an result in fines up to \$250,000, or imprisonment for up to 20 years, 9, and 3571. |
| | | X /s/ Austin Joshua Williams Austin Joshua Williams, Debtor 1 | XSignature of Debtor 2 |
| | | Executed on 09/05/2019 | Executed on |

MM / DD / YYYY

MM / DD / YYYY

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| Debtor 1 Austin Joshua Wi | Illiams | Case number (if know | n) | | |
|---|---|---|---|--|--|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | eligibility to proceed under Chapter 7, 11, 1 relief available under each chapter for which the debtor(s) the notice required by 11 U.S | 2, or 13 of title 11, United Stach the person is eligible. I also C. § 342(b) and, in a case in | petition, declare that I have informed the debtor(s) about or 13 of title 11, United States Code, and have explained the the person is eligible. I also certify that I have delivered to . § 342(b) and, in a case in which § 707(b)(4)(D) applies, iry that the information in the schedules filed with the petition | | |
| | X /s/ Jonathan Brent Signature of Attorney for Debtor | Date | 09/05/2019 MM / DD / YYYY | | |
| | Jonathan Brent Printed name Jonathan Brent Attorney at Law Firm Name 462 N Taylor Number Street Suite 105 | | | | |
| | St. Louis City | MO State | - 63108 ZIP Code | | |
| | Contact phone (314) 200-5346 | Email address | | | |
| | 59169MO | | _ | | |
| | Bar number | State | | | |

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| Debtor 1 | Austin | Joshua | Williams | | |
|--|--|--|--|--|---|
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ | |
| United States Ba | nkruptcy Court for | the: EASTERN DIS | STRICT OF MISSOURI | _ | |
| Case number | | | | | eck if this is an |
| (if known) | | | | _ | nended filing |
| Official Form | 106A/B | | | | |
| | /B: Property | <i>I</i> | | | 12/1 |
| | | | 64 . B. | = | |
| Do you own o | or have any legal to Part 2. | or equitable interes | | eal Estate You Own or H | ave an Interest In |
| Do you own o No. Go t Yes. Wh 1.1. 1720 Seattle St | or have any legal | y? What is the Check all | the property? | g, land, or similar property? Do not deduct secured amount of any secured | claims or exemptions. Put the claims on Schedule D: |
| Do you own o No. Go t Yes. Wh 1.1. 1720 Seattle St | or have any legal to Part 2. nere is the property | y? What is the Check all with the control of the c | st in any residence, building | g, land, or similar property? Do not deduct secured amount of any secured | claims or exemptions. Put th I claims on <i>Schedule D:</i> |
| No. Go t No. Go t Yes. Wh 1.1. 1720 Seattle St Street address, if availa | or have any legal to Part 2. here is the property able, or other descript | what is the Check all stored Duple Cond | the property? I that apply. le-family home ex or multi-unit building dominium or cooperative ufactured or mobile home | g, land, or similar property? Do not deduct secured amount of any secured Creditors Who Have Concept Current value of the | claims or exemptions. Put th I claims on <i>Schedule D:</i> Ilaims Secured by Property. Current value of the portion you own? |
| No. Go t No. Go t Yes. Wh 1.1. 1720 Seattle St Street address, if availa | or have any legal to Part 2. nere is the property able, or other descript | y? What is the Check all Tion Tool Too | the property? I that apply. le-family home ex or multi-unit building dominium or cooperative ufactured or mobile home | g, land, or similar property? Do not deduct secured amount of any secured Creditors Who Have Comment value of the entire property? \$30,000.0 Describe the nature of interest (such as fee second contents) | claims or exemptions. Put the claims on Schedule D: laims Secured by Property. Current value of the portion you own? 30,000.00 f your ownership simple, tenancy by the |
| No. Go t No. Go t Yes. Wh 1.1. 1720 Seattle St Street address, if availa | or have any legal to Part 2. here is the property able, or other descript | y? What is the Check all Tion Tool Too | the property? I that apply. Ile-family home ex or multi-unit building dominium or cooperative ufactured or mobile home distant property eshare | g, land, or similar property? Do not deduct secured amount of any secured Creditors Who Have Concept Current value of the entire property? \$30,000.0 Describe the nature of interest (such as fee sentireties, or a life est | claims or exemptions. Put the claims on Schedule D: laims Secured by Property. Current value of the portion you own? 30,000.00 f your ownership simple, tenancy by the |
| No. Go to Yes. What is a second of the No. Go to Yes. What is a second of the No. Go to Yes. What is a second of the No. Go to Yes. What is a second of the No. Go to Yes. Is a second of the No. Go to Yes. Is a second of the Yes. It is a second of the Yes. It is a second of the Yes. Is a second of the Yes. It is a second of th | or have any legal to Part 2. here is the property able, or other descript MO 631 State ZIP | y? What is the Check all Interest Inte | the property? I that apply. Ile-family home ex or multi-unit building dominium or cooperative ufactured or mobile home distrement property eshare er an interest in the property | g, land, or similar property? Do not deduct secured amount of any secured Creditors Who Have Concept Value of the entire property? \$30,000.0 Describe the nature of interest (such as fee sentireties, or a life est | claims or exemptions. Put the claims on Schedule D: laims Secured by Property. Current value of the portion you own? 30,000.00 f your ownership simple, tenancy by the |
| No. Go t No. Go t Yes. Wh No. Go t | or have any legal to Part 2. here is the property able, or other descript MO 631 State ZIP | what is the Check all Single Cond 121 | the property? I that apply. Ile-family home ex or multi-unit building dominium or cooperative ufactured or mobile home distrement property eshare er an interest in the property | Do not deduct secured amount of any secured Creditors Who Have Concentration of the entire property? Sao,000.0 Describe the nature of interest (such as fee sentireties, or a life estenties) Fee Simple Check if this is concentrations | claims or exemptions. Put the claims on Schedule D: laims Secured by Property. Current value of the portion you own? 30,000.00 f your ownership simple, tenancy by the |

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| Debtor 1 Austin Joshua Williams | | Cas | Case number (if known) | | | |
|---------------------------------|--------------------|--|--|---------------------------------------|---|--|
| Part 2 | Descr | ibe Your Vehicles | | | | |
| | | | e interest in any vehicles, whether they are a vehicle, also report it on Schedule G: Exec | | | |
| 3. Car | s, vans, truck | s, tractors, sport utility | vehicles, motorcycles | | | |
| | No Yes | | | | | |
| 3.1. Make: | | Honda | Who has an interest in the property? Check one. | amount of any secured cla | | |
| Model: Year: | | Accord 2014 | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? | |
| | nate mileage: | 60,000 | At least one of the debtors and another | \$12,000.00 | \$12,000.00 | |
| 2014 Ho miles) | | d (approx. 60,000 | Check if this is community property (see instructions) | | | |
| Exa ☑ | | | and other recreational vehicles, other veh al watercraft, fishing vessels, snowmobiles, m | | | |
| | | • | own for all of your entries from Part 2, inclued the Part 2. Write that number here | _ | \$12,000.00 | |
| | | | | | | |
| Part 3 | | | and Household Items sterest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. | |
| Exa | _ | s and furnishings appliances, furniture, line | ens, china, kitchenware | | | |
| | | e See continuatio | n page(s). | | \$1,500.00 | |
| Exa | music | | video, stereo, and digital equipment; compute | | _ | |
| | No Yes. Describ | e Miscellaneous h | nousehold electronics | | \$300.00 | |
| | | ues and figurines; paintin | gs, prints, or other artwork; books, pictures, o | | _ | |
| ت ا | No Yes. Describ | e | | |] | |
| | mples: Sports | | , and other hobby equipment; bicycles, pool t tools; musical instruments | ables, golf clubs, skis; | _ | |
| ت ا | No Yes. Describ | e | | |] | |

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| Deb | otor 1 Austin Joshua Williams | Case number (if known) | |
|------|--|--|---|
| 10. | Firearms Examples: Pistols, rifles, shotguns, ammunition, and related No | d equipment | |
| | Yes. Describe smith & wesson pistol | | \$200.00 |
| 11. | Clothes Examples: Everyday clothes, furs, leather coats, designer w | vear, shoes, accessories | |
| | Yes. Describe Clothes and miscellaneous wes | aring apparel | \$500.00 |
| 12. | Jewelry Examples: Everyday jewelry, costume jewelry, engagement gold, silver | rings, wedding rings, heirloom jewelry, watches, gems, | |
| | ✓ No ☐ Yes. Describe | | |
| 13. | Non-farm animals Examples: Dogs, cats, birds, horses No | | |
| | Yes. Describe | | |
| 14. | Any other personal and household items you did not alredid not list | eady list, including any health aids you | |
| | ✓ No Yes. Give specific information | | <u> </u> |
| 45 | A LI di La dall'accordina della di La constanti di Consta | | |
| 13. | Add the dollar value of all of your entries from Part 3, inc attached for Part 3. Write the number here | | \$2,500.00 |
| Pa | art 4: Describe Your Financial Assets | | |
| Do y | you own or have any legal or equitable interest in any of t | he following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examples: Money you have in your wallet, in your home, in a petition | a safe deposit box, and on hand when you file your | |
| | □ No ☑ Yes | Cash: | \$0.00 |
| 17. | Deposits of money Examples: Checking, savings, or other financial accounts; or brokerage houses, and other similar institutions. institution, list each. | · | |
| | ☐ No ☑ Yes Institution name: | | |
| | 17.1. Checking account: Simmons Checkin | g account | \$0.00 |

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| Deb | tor 1 Austin Joshua W | /illiams | Case number (if known) | |
|-----|--|--|---|----------|
| 18. | ✓ No | ublicly traded stocks estment accounts with brokerage firms, Institution or issuer name: | , money market accounts | |
| 19. | _ | and interests in incorporated and un | nincorporated businesses, including | |
| | ✓ No ☐ Yes. Give specific information about | Name of entity: | % of ownership: | |
| 20. | Negotiable instruments inclu | e bonds and other negotiable and no ude personal checks, cashiers' checks, are those you cannot transfer to some | promissory notes, and money orders. | |
| | ✓ No Yes. Give specific information about them | Issuer name: | | |
| 21. | profit-sharing pla | ERISA, Keogh, 401(k), 403(b), thrift sa | avings accounts, or other pension or | |
| | ✓ No Yes. List each account separately. T | ype of account: Institution name: | : | |
| 22. | · | posits you have made so that you may | continue service or use from a company (electric, gas, water), telecommunications | |
| | ✓ No ☐ Yes | Institution name or i | individual: | |
| 23. | Annuities (A contract for a ✓ No | | you, either for life or for a number of years) | |
| 24. | Interests in an education II 26 U.S.C. §§ 530(b)(1), 529a | | E program, or under a qualified state tuition pro | ogram. |
| | ✓ No Yes | Institution name and description. Sep | arately file the records of any interests. 11 U.S.C. | § 521(c) |
| 25. | Trusts, equitable or future powers exercisable for you | interests in property (other than any ur benefit | rthing listed in line 1), and rights or | |
| | ✓ No✓ Yes. Give specific information about them | | | |
| 26. | Examples: Internet domain | marks, trade secrets, and other intell names, websites, proceeds from royalt | • • • • | |
| | ✓ No Yes. Give specific information about them | | | |
| 27. | Licenses, franchises, and Examples: Building permits | - | ciation holdings, liquor licenses, professional licen | ses |
| | No ☐ Yes. Give specific information about them. | | | |

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| Deb | tor 1 Austin Joshua Williams | Case number (if known) | |
|-----|--|---|---|
| Mor | ney or property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you | | |
| | ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years | | Federal: State: Local: |
| 29. | Family support Examples: Past due or lump sum alimony, spousal support, child support, mainte ✓ No | enance, divorce settlement, | property settlement |
| | ✓ No Yes. Give specific information | Alimony: | |
| | | Maintenand | ce: |
| | | Support: | |
| | | Divorce se | |
| | | Property se | ettlement: |
| 30. | Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick compensation, Social Security benefits; unpaid loans you made to so ✓ No ☐ Yes. Give specific information | | , |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); cre ✓ No ✓ Yes. Name the insurance company of each policy and list its value | dit, homeowner's, or renter Beneficiary: | 's insurance Surrender or refund value: |
| 32. | Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance p entitled to receive property because someone has died | olicy, or are currently | |
| | ✓ No Yes. Give specific information | | |
| 33. | Claims against third parties, whether or not you have filed a lawsuit or made Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | e a demand for payment | |
| | Tes. Describe each claim | | |
| 34. | Other contingent and unliquidated claims of every nature, including countercrights to set off claims | claims of the debtor and | |
| | ✓ No Yes. Describe each claim | | |
| 35. | Any financial assets you did not already list | | |
| | ✓ No ☐ Yes. Give specific information | | |

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| Deb | otor 1 | Austin Josh | hua Willian | ıs | | Case number (if kno | wn) | |
|-----|---------------|-----------------------|-----------------|---|----------------------------|--------------------------|-----------|---|
| 36. | | | | ır entries from Part 4, ind umber here | | | → | \$0.00 |
| P | art 5: | Describe A | Any Busine | ess-Related Propert | y You Own or Hav | e an Interest In. | List any | real estate in Part 1. |
| 37. | Do you | ມ own or have | any legal o | equitable interest in an | y business-related pro | perty? | | |
| | سخا | o. Go to Part 6. | | | | | | |
| 38. | Accour | nts receivable | e or commis | sions you already earne | d | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | | | | | | | |
| | ✓ No ☐ Yes | s. Describe | | | | | |] |
| 39. | | | _ | outers, software, modems | , printers, copiers, fax m | nachines, rugs, telepl | nones, | J |
| | ✓ No ☐ Yes | s. Describe | | | | | |] |
| 40. | Machir | nery, fixtures, | , equipment, | supplies you use in bus | iness, and tools of you | ur trade | | • |
| | ✓ No | Г | | | | | | 1 |
| | ∐ res | s. Describe | | | | | | |
| 41. | Invento | ory | | | | | | |
| | ✓ No ☐ Yes | s. Describe | | | | | |] |
| 42. | Interes | sts in partners | ships or joint | ventures | | | | |
| | ✓ No ☐ Yes | s. Describe | Name of e | ntity: | | % of o | wnership: | |
| 43. | Custon | ner lists, mail | ling lists, or | other compilations | | | | |
| | ✓ No ☐ Yes | s. Do your lis | sts include p | ersonally identifiable inf | ormation (as defined in | า 11 U.S.C. § 101(41 | A))? |] |
| 44. | Any bu | ısiness-relate | d property y | ou did not already list | | | | - |
| | ✓ No ☐ Yes | s. Give specifi | iic information | 1. | | | | |
| 45. | | e dollar value | - | ır entries from Part 5, ind | cluding any entries for | pages you have | ا د | \$0.00 |

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| Deb | otor 1 | Austin Joshua Williams | Case number (if known) | Case number (if known) | | |
|-----|---------------|--|---|---|--|--|
| Pa | | Describe Any Farm- and Commercial Fishing-Fif you own or have an interest in farmland, list it in | | n Interest In. | | |
| 46. | Do you | ս own or have any legal or equitable interest in any farm- લ | or commercial fishing-related property? | | | |
| | | o. Go to Part 7. s. Go to line 47. | | | | |
| | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. | | |
| 47. | Farm a | animals en: Livestock, poultry, farm-raised fish | | | | |
| | ☑ No | | | 1 | | |
| | ☐ Yes | S | | | | |
| 48. | Crops- | either growing or harvested | | | | |
| | | s. Give specific ormation | |] | | |
| 49. | Farm a | and fishing equipment, implements, machinery, fixtures, a | nd tools of trade | | | |
| | ✓ No ☐ Yes | | |] | | |
| 50. | Farm a | and fishing supplies, chemicals, and feed | | • | | |
| | ✓ No ☐ Yes | | |] | | |
| 51. | Any far | rm- and commercial fishing-related property you did not a | already list | - | | |
| | | s. Give specific ormation | |] | | |
| 52. | | e dollar value of all of your entries from Part 6, including a ed for Part 6. Write that number here | | \$0.00 | | |
| Pa | art 7: | Describe All Property You Own or Have an Inte | erest in That You Did Not List Above | | | |
| 53. | | u have other property of any kind you did not already list? bles: Season tickets, country club membership | | | | |
| | ✓ No ☐ Yes | s. Give specific information. | 1 | | | |
| 54 | Add the | e dollar value of all of your entries from Part 7. Write that | number here | \$0.00 | | |

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| Debtor 1 | Austin Joshua Williams | Case nu | ımber (if known) | |
|------------|--|---------------------|------------------------------|--------------|
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. Part 1 | : Total real estate, line 2 | | | \$30,000.00 |
| 56. Part 2 | : Total vehicles, line 5 | \$12,000.00 | | |
| 57. Part 3 | : Total personal and household items, line 15 | \$2,500.00 | | |
| 58. Part 4 | : Total financial assets, line 36 | \$0.00 | | |
| 59. Part 5 | : Total business-related property, line 45 | \$0.00 | | |
| 60. Part 6 | : Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part 7 | : Total other property not listed, line 54 | + \$0.00 | | |
| 62. Total | personal property. Add lines 56 through 61 | \$14,500.00 | Copy personal property total | +\$14,500.00 |
| 63. Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$44,500.00 |

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| Debtor | Austin Joshua Williams | Case number (if known) | |
|-------------|---|------------------------|------------|
| 6. <u>H</u> | lousehold goods and furnishings (details): | | |
| M | discellaneous household goods and furnishings | | \$1,000.00 |
| h | nousehold tools | | \$500.00 |

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| Fill in this inf | ormation to i | dentify your | case: | | | | | |
|---|---|---|--|--|---|--|---|---------|
| Debtor 1 | Austin | Joshua | Williams | | | | | |
| | First Name | Middle Name | | | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | e Last Name | | | | | |
| | | r the: EASTERN | N DISTRICT OF MIS | sso | URI | | Chook if this is an | |
| Case number (if known) | | | | | | | Check if this is an amended filing | |
| Official Form | 106C | | | | | | | |
| Schedule C | : The Prope | erty You Cl | aim as Exemp | ot | | | | 04/19 |
| Using the property space is needed, fi write your name an For each item of p is to state a speci exempted up to the | you listed on Sci ill out and attach id case number (i property you clai fic dollar amoun ne amount of any | hedule A/B: Proporto this page as m f known). im as exempt, you it as exempt. Alt r applicable stat | erty (Official Form 106 any copies of Part 2 ou must specify the atternatively, you may utory limit. Some ex | 6A/B 2: Ad amou clair cemp | as your source ditional Page a unt of the exem the full fair m tionssuch as | e, list the as nece aption y narket v | esponsible for supplying correct infor e property that you claim as exempt. ssary. On the top of any additional prou claim. One way of doing so value of the property being for health aids, rights to lowever, if you claim an | If more |
| exemption of 100° | % of fair market | value under a la | | mpti | on to a particul | lar doll | ar amount and the value of the | |
| Part 1: Ide | entify the Prop | perty You Cla | im as Exempt | | | | | |
| 1. Which set of | exemptions are | vou claiming? | Check one only, | even | if your spouse i | is filina | with you | |
| | • | • | kruptcy exemptions. | | | Ū | with you. | |
| <u></u> | - | | J.S.C. § 522(b)(2) | | 3 ()(| , | | |
| 2. For any prop | erty you list on | Schedule A/B th | at you claim as exen | npt. i | fill in the inform | nation I | below. | |
| Brief description of Schedule A/B that | of the property a | and line on | Current value of the portion you | Am | ount of the mption you cla | | Specific laws that allow exempti | on |
| | | | own Copy the value from Schedule A/B | | eck only one box th exemption | x for | | |
| Brief description: | | | \$30,000.00 | V | , \$1,771.0 | 0 | Mo. Rev. Stat. § 513.475 | |
| Principal Reside | ence | | +, | | 100% of fair m | | | |
| Line from Schedule | e A/B: 1.1 | | | | value, up to ar applicable stat limit | - | | |
| Brief description: | | | \$12,000.00 | $\overline{\mathbf{Q}}$ | \$0.00 | | Mo. Rev. Stat. § 513.430.1(5) | |
| 2014 Honda Acc | cord (approx. 6 | 0,000 miles) | | | 100% of fair m | | , | |
| Line from Schedule | e A/B: 3.1 | | | | value, up to ar applicable stat limit | • | | |
| - | - | - | more than \$170,350? rears after that for cas | | led on or after th | ne date | of adjustment.) | |
| | | property covered | by the exemption with | hin 1 | ,215 days befor | e you fi | led this case? | |

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| Debtor 1 | Austin Joshua Williams | | | Case number | r (if known) |
|---------------|---|--|----------|--|------------------------------------|
| Part 2: | Additional Page | | | | |
| | iption of the property and line on //B that lists this property | Current value of the portion you own | | ount of the mption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | | eck only one box for h exemption | |
| furnishing | ous household goods and | \$1,000.00 | | \$1,000.00 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430.1(1) |
| Brief descrip | | \$500.00 | <u> </u> | \$500.00 100% of fair market | Mo. Rev. Stat. § 513.430.1(1) |
| Line from So | chedule A/B: 6 | | | value, up to any applicable statutory limit | |
| Brief descrip | otion: eous household electronics | \$300.00 | Ø | \$300.00 100% of fair market | Mo. Rev. Stat. § 513.430.1(1) |
| | chedule A/B: 7 | | | value, up to any applicable statutory limit | |
| Brief descrip | otion: esson pistol | \$200.00 | Ø | \$200.00 100% of fair market | Mo. Rev. Stat. § 513.430.1(12) |
| Line from So | chedule A/B: 10 | | | value, up to any applicable statutory limit | |
| apparel | otion: nd miscellaneous wearing chedule A/B:11 | <u>\$500.00</u> | | \$500.00 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430.1(1) |
| Brief descrip | otion: | \$0.00 | 1 | \$0.00 100% of fair market | Mo. Rev. Stat. § 513.430.1(3) |
| Line from So | chedule A/B: 16 | | _ | value, up to any applicable statutory limit | |
| Brief descrip | | \$0.00 | | \$0.00 | Mo. Rev. Stat. § 513.430.1(3) |
| | Checking account chedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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| | | | • | | | |
|--|--|--|--|---|-----------------|-------|
| Fill in this inf | ormation to i | identify your case | : | | | |
| Debtor 1 | Austin | Joshua | Williams | | | |
| Debior 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court fo | or the: EASTERN DIS | STRICT OF MISSOL | JRI | | |
| | aproy court is | | | | | |
| Case number (if known) | | | | | Check if this i | |
| | | | | | amended filin | g |
| Official Form | 106D | | | | | |
| Schedule D: | Creditors | Who Have Cla | ims Secured | by Property | | 12/15 |
| On the top of any 1. Do any credit □ No. Che □ Yes. Fill Part 1: Lis 2. List all secure claim, list the creditor has a | additional page tors have claims ck this box and s in all of the infor tt All Secured ed claims. If a c creditor separate particular claim, ible, list the clair | ss, write your name are secured by your prosubmit this form to the remation below. | one secured one than one in Part 2. As | it out, number the entrace. chedules. You have not Column A Amount of claim Do not deduct the value of collateral | | |
| 2.1 | | | e property that | \$27,729.00 | \$30,000.00 | |
| HOMEPOINT Fir | nancial | secures the | | Ψ21,123.00 | Ψου,σου.σο | |
| Creditor's name 11511 Luna Roa | | ——— Principal R | esidence | | | |
| Number Street | d Ste 200 | | | | | |
| | | Continge | ent | is: Check all that apply. | | |
| Dallas City | TX 75234 State ZIP Cod | | | | | |
| Who owes the del | ot? Check one. | Disputed | ı • n. Check all that app | h. | | |
| Debtor 1 only | | | • | i as mortgage or secured | d car loan) | |
| Debtor 2 only | | _ | lien (such as tax lien, | | | |
| Debtor 1 and D | | ☐ Judgmer | nt lien from a lawsuit | | | |
| – | the debtors and | ✓ Other (III | cluding a right to offse | et) | | |
| to a communit | | Mortga | y e | | | |
| Date debt was inc | urred <u>06/01/2</u> | 2016 Last 4 digits | of account number | 2 7 5 1 | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$27,729.00

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| Debtor 1 Austin Joshua Williams | Case number (if known) | | | | |
|--|---|--|---|-----------------------------------|--|
| Part 1: Additional Page After listing any entries on sequentially from the previous | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | |
| Example 2.2 HOMEPOINT Financial Creditor's name 11511 Luna Road Ste 200 Number Street | Describe the property that secures the claim: Principal Residence | \$3,000.00 | \$3,000.00 | | |
| Dallas TX 75234 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, medical Judgment lien from a lawsuit Other (including a right to offset) Arrearage claim | mortgage or secured | car loan) | | |
| Date debt was incurred Various 2.3 Metropolitan Sewer District Creditor's name 2350 Market Street Number Street | Last 4 digits of account number Describe the property that secures the claim: Principal Residence | <u>2 7 5 1</u> <u>\$500.00</u> | \$30,000.00 | | |
| Saint Louis MO 63103 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, medical Judgment lien from a lawsuit) Other (including a right to offset) Utilities | mortgage or secured | car loan) | | |
| Date debt was incurred | Last 4 digits of account number | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$3,500.00

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| Debtor 1 Austin Joshua Williams | | _ Case number (if | known) | | | | | |
|--|---|--|---|-----------------------------------|--|--|--|--|
| Additional Page Part 1: After listing any entries on sequentially from the previous | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | | | |
| Navy Federal Credit Union Creditor's name PO Box 3000 Number Street | Describe the property that secures the claim: \$18,217.00 \$12,000.00 \$6,217.00 2014 Honda Accord (approx. 60,000 miles) | | | | | | | |
| Merrifield VA 22119 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) Loan | mortgage or secured | car loan) | | | | | |
| Date debt was incurred 06/01/2017 | Last 4 digits of account number | 6 6 3 0 | | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

•

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$49,446.00

\$18,217.00

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| Fill in this info | ormation to id | dentify your c | ase: | | | |
|---|---|---|---|--|--|-----------------------------|
| Debtor 1 | Austin | Joshua | Williams | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for | the: EASTERN | DISTRICT OF MISSOURI | | | |
| Case number | ., ., | | | _ | | |
| (if known) | | | | L | Check if this is a amended filing | an |
| Official Form | 106E/F | | | | | |
| Schedule E/ | F: Creditor | s Who Hav | e Unsecured Claims | | | 12/1 |
| If more space is no to this page. On the | eeded, copy the he top of any ad | Part you need, fi ditional pages, w | claims that are listed in Schedule ill it out, number the entries in the rite your name and case number (secured Claims | boxes on the left. A | | |
| 1. Do any credit | ors have priority | unsecured clair | ns against you? | | | |
| ☐ No. Go to ✓ Yes. | o Part 2. | | | | | |
| claim. For each show both price more space is claim, list the | ch claim listed, id prity and nonpriori needed for priori other creditors in | entify what type o ty amounts. As n ty unsecured clair Part 3. | creditor has more than one priority uf claim it is. If a claim has both prior nuch as possible, list the claims in alms, fill out the Continuation Page of e instructions for this form in the inst | ity and nonpriority ame phabetical order acco Part 1. If more than o | ounts, list that clain rding to the creditor | m here and or's name. If |
| 2.1 | | | | \$0.00 | \$0.00 | \$0.0 |
| Internal Revenue | | | Last 4 digits of account number | | | |
| PO Box 7346 | | | When was the debt incurred? | | _ | |
| Number Street | | | As of the date you file, the claim | is: Check all that app | oly. | |
| | | | Contingent Unliquidated | | | |
| Philedelphia City | PA State | 19101-7346 ZIP Code | Disputed | | | |
| Who incurred the | debt? Check of | one. | Type of PRIORITY unsecured cla | im: | | |
| Debtor 1 only Debtor 2 only | | | ☐ Domestic support obligations ☐ Taxes and certain other debts | you owe the governm | ent | |
| Debtor 1 and D At least one of | ebtor 2 only the debtors and a | another | Claims for death or personal in | | | |
| — | laim is for a con | | intoxicated Other. Specify | | | |
| Is the claim subject | ct to offset? | | <u> </u> | | | |
| ✓ No Yes | | | | | | |

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| Debtor 1 | Austin Joshua Williams Ca | | | Case number | se number (if known) | | | | | |
|---|-----------------------------|--------------------|-------------------|--|-------------------------|-------------|-----------------|--------------------|--|--|
| Part 1: | Your PRIC | RITY | Unsecured C | laims Continuation Pag | je | | | | | |
| After listing previous pa | | this pa | age, number thei | m sequentially from the | Total | claim | Priority amount | Nonpriority amount | | |
| 2.2 | | | | | | \$0.00 | \$0.00 | \$0.00 | | |
| Priority Credito Bankrupto | ey Unit Street '5 h St City | MO State | 65105 ZIP Code | Last 4 digits of account num When was the debt incurred' As of the date you file, the cl Contingent Unliquidated Disputed | ? | II that app | – bly. | | | |
| Debtor 1 Debtor 2 Debtor 1 At least Check i | 1 only | ors and or a co | another | Type of PRIORITY unsecured ☐ Domestic support obligation ☐ Taxes and certain other decomposition ☐ Claims for death or personintoxicated ☐ Other. Specify | ons ebts you owe the | • | ent | | | |

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| Debtor 1 | Austin Joshua Williams | Case number (if known) | |
|---|--|---|-------------|
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | |
| 3. Do any | / creditors have nonpriority unsecured | I claims against you? | |
| - | o. You have nothing to report in this part | . Submit this form to the court with your other schedules. | |
| If a cre type of | ditor has more than one nonpriority unse claim it is. Do not list claims already inc | in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim liste luded in Part 1. If more than one creditor holds a particular claim, list the of unsecured claims, fill out the Continuation Page of Part 2. | |
| | | | Total claim |
| 4.1 Dpt of Edu | ucation | Last 4 digits of account number 6 0 7 2 | \$3,787.00 |
| Nonpriority Cre PO Box 16 | | When was the debt incurred? 09/01/2014 | |
| | Street | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | |
| St Paul | MN 55116 | Disputed | |
| Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 3 Check i | • | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account | |
| 4.2 | | | \$1,904.00 |
| Dpt of Edu Nonpriority Cre PO Box 16 Number St Paul City | editor's Name | Last 4 digits of account number 8 2 7 2 When was the debt incurred? 12/01/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| Who incurre ☐ Debtor ☐ Debtor ☐ Debtor ☐ At least ☐ Check i | ed the debt? Check one. 1 only | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account | |

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| Debtor 1 Austin Joshua Williams | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.3 | | \$1,904.00 |
| Dpt of Education | Last 4 digits of account number 8 5 7 2 | |
| Nonpriority Creditor's Name PO Box 16448 | When was the debt incurred? 03/01/2014 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| St Paul MN 55116 City State ZIP Code | | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Charge Account | |
| Is the claim subject to offset? | | |
| ✓ No □ Yes | | |
| 4.4 | | £4 000 00 |
| Dpt of Education | Last 4 digits of account number 2 4 7 2 | \$1,882.00 |
| Nonpriority Creditor's Name | When was the debt incurred? 10/01/2015 | |
| PO Box 16448 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| | Unliquidated | |
| St Paul MN 55116 | ─ | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans Obligations origing out of a congretion agreement or diverse | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | Other. Specify | |
| Is the claim subject to offset? | Charge Account | |
| ☑ No | | |
| ☐ Yes | | |
| 4.5 | | \$1,727.00 |
| Dpt of Education | Last 4 digits of account number 6 1 7 2 | |
| Nonpriority Creditor's Name PO Box 16448 | When was the debt incurred? 09/01/2014 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| 0(P-vd | Disputed | |
| St Paul MN 55116 City State ZIP Code | | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Charge Account | |
| Is the claim subject to offset? | | |
| ✓ No □ Yes | | |

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| Debtor 1 Austin Joshua Williams | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim |
| 4.6 | | \$1,233.00 |
| Dpt of Education | Last 4 digits of account number 8 3 7 2 | |
| Nonpriority Creditor's Name PO Box 16448 | When was the debt incurred? 12/01/2013 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| | ☐ Unliquidated ☐ Disputed | |
| St Paul MN 55116 City State ZIP Code | _ | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Charge Account | |
| Is the claim subject to offset? | · · | |
| ✓ No □ Yes | | |
| | | |
| A.7 | Local Additional account numbers 0 0 7 0 | \$1,222.00 |
| Dpt of Education Nonpriority Creditor's Name | Last 4 digits of account number 8 6 7 2 When was the debt incurred? 03/01/2014 | |
| PO Box 16448 | As of the date you file, the claim is: Check all that apply. | |
| Number Street | _ Contingent | |
| | Unliquidated | |
| St Paul MN 55116 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ☑ Other. Specify | |
| Check if this claim is for a community debt Is the claim subject to offset? | Charge Account | |
| No No | | |
| Yes | | |
| 4.8 | | \$1,055.00 |
| Dpt of Education | Last 4 digits of account number 2 5 7 2 | |
| Nonpriority Creditor's Name PO Box 16448 | When was the debt incurred? 10/01/2015 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| St Paul MN 55116 City State ZIP Code | _ | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | | |
| Is the claim subject to offset? | | |
| No No | | |
| ☐ Yes | | |

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| Austin Joshua Williams | Case number (if known) | |
|---|---|-----------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.9 | | \$0.00 |
| Dpt of Education | Last 4 digits of account number | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| PO Box 16448 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| St Paul MN 55116 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | | |
| Is the claim subject to offset? | Charge Account | |
| No No | | |
| Yes | | |
| 4.10 | | * 477.00 |
| HOMEPOINT Financial | Last 4 digits of account number 5 0 0 3 | \$477.00 |
| Nonpriority Creditor's Name | Last 4 digits of account number 5 0 0 3 When was the debt incurred? 12/01/2018 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Number Street | _ ☐ Contingent | |
| | Unliquidated | |
| | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ☑ Other. Specify | |
| Check if this claim is for a community debt | Collection | |
| Is the claim subject to offset? ✓ No | | |
| ☑ No □ Yes | | |
| <u> </u> | | |
| 4.11 | | \$7,899.00 |
| Navy Federal Credit Union Nonpriority Creditor's Name | Last 4 digits of account number 6 2 1 9 | |
| PO Box 3000 | When was the debt incurred? 01/01/2017 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | ☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent | |
| Manuffald VA 00440 | Disputed | |
| Merrifield VA 22119 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Loan | |
| Is the claim subject to offset? | | |
| No No | | |
| Yes | | |

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| Austin Joshua Williams | Case number (if known) | |
|---|---|-----------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim |
| 4.12 | | \$5,730.00 |
| Navy Federal Credit Union | Last 4 digits of account number 2 6 1 8 | |
| Nonpriority Creditor's Name | When was the debt incurred? 06/01/2016 | |
| PO Box 3000 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | Unliquidated | |
| Merrifield VA 22119 | Disputed | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Loan | |
| Is the claim subject to offset? ✓ No | | |
| Yes | | |
| 4.13 | | 0.110.00 |
| | Last 4 digits of account number 3 6 3 2 | \$113.00 |
| Receivable Management Nonpriority Creditor's Name | Last 4 digits of account number 3 6 3 2 When was the debt incurred? 12/01/2018 | |
| 240 Emery St Number Street | As of the date you file, the claim is: Check all that apply. | |
| Number Street | _ Contingent | |
| | Unliquidated | |
| Bethlehem PA 18015 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | Collection Attorney | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| □ . • • | | |

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| Debtor 1 | Austin Joshua Williams | Case number (if known) |
|----------|--|------------------------|
| Part 4: | Add the Amounts for Each Type of Unsecured Claim | |

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|--------------------------|-----|--|--------------|--------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| IIOIII FAIL I | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. _ | ÷\$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$0.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts | | \$0.00 |
| | 6h. | | | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. _ | £\$28,933.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$28,933.00 |

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| Fill in this information to identify your case: | | | | | | |
|---|----------------------|---------------------------|-----------------------|---|---------------------------------|--|
| Debtor 1 | Austin First Name | Joshua Middle Name | Williams Last Name | | | |
| Debtor 2 | | ivildule Name | Lastivallie | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court fo | r the: EASTERN DIS | TRICT OF MISSOURI | - | | |
| Case number (if known) | | | | | Check if this is amended filing | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| Fill | in this inf | Officialion to it | • • | | | |
|-------------------------|---|--|--|--|---|---|
| Debt | or 1 | Austin | Joshua | Williams | | |
| | | First Name | Middle Name | Last Name | | |
| Debt | | | | | | |
| (Spc | use, if filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Ba | nkruptcy Court fo | r the: EASTERN DIS | STRICT OF MISSOURI | | |
| Case | e number | | | | | Charle if this is an |
| (if kr | iown) | | | | Ц | Check if this is an amended filing |
| | | | | | | - |
| Offic | ial Form | 106H | | | | |
| | | | -1-4 | | | |
| 5Cn | eaule H | : Your Code | eptors | | | |
| wo m | arried peop d, copy the | le are filing toge Additional Page | ther, both are equally , fill it out, and numbe | r any debts you may have. Be a r responsible for supplying corner the entries in the boxes on the lame and case number (if know | ect information. If relation is left. Attach the Ac | nore space is dditional Page to this |
| two m neede page. | arried peop d, copy the On the top | le are filing toge Additional Page | ther, both are equally , fill it out, and numb Il Pages, write your n | / responsible for supplying cor er the entries in the boxes on th | ect information. If releft. Attach the Adn). Answer every qu | nore space is dditional Page to this |
| two mneedepage. 1. [| or you have No Yes Within the la | ole are filing toge Additional Page of any Additional any codebtors? st 8 years, have you, California, Idal | ther, both are equally, fill it out, and numb al Pages, write your n (If you are filing a jo you lived in a commu | y responsible for supplying cor er the entries in the boxes on th name and case number (if know | rect information. If rele left. Attach the Adn). Answer every quas as a codebtor.) | more space is dditional Page to this uestion. |
| two mneedepage. 1. [| arried peop d, copy the On the top o you have No Yes Within the la nclude Arizon No. Go | ole are filing toge Additional Page of any Additional any codebtors? st 8 years, have year, California, Idal to line 3. | ther, both are equally, fill it out, and number of the learning and le | y responsible for supplying correct the entries in the boxes on the same and case number (if known with the case, do not list either spouse unity property state or territory? | rect information. If releft. Attach the Adn). Answer every quas as a codebtor.) (Community property, Washington, and V | more space is dditional Page to this uestion. |
| two mneedepage. 1. [| arried peop d, copy the On the top o you have No Yes Within the la nclude Arizon No. Go | ole are filing toge Additional Page of any Additional any codebtors? st 8 years, have years, California, Idal to line 3. d your spouse, for | ther, both are equally, fill it out, and number of the learning and le | y responsible for supplying correct the entries in the boxes on the name and case number (if know bint case, do not list either spouse unity property state or territory? | rect information. If releft. Attach the Adn). Answer every quas as a codebtor.) (Community property, Washington, and V | more space is dditional Page to this uestion. |

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| F | ill in this inform | ation to i | dentify your case: | | | | | |
|--------------------------|--|--|---|--|---------------------|-------------------------------|------------------|--|
| | Debtor 1 | Austin | Joshua | Williams | 3 | | | |
| | | First Name | Middle Name | Last Name | | | Che | ck if this is: |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | An amended filing |
| | United States Bankro | uptcv Court | for the: EASTERN D | ISTRICT OF MIS | SOUR | RI | | A supplement showing postpetition |
| | Case number | | | | | | | chapter 13 income as of the following date: |
| | (if known) | | | | | | | MM / DD / YYYY |
| 0 | fficial Form 10 | <u>61</u> | | | | | | |
| So | chedule I: You | ur Incon | ne | | | | | 12/15 |
| res inc abo you | sponsible for supply lude information ab out your spouse. If ur name and case n | ing correct out your sp more space | information. If you are sepa is needed, attach a soown). Answer every | e married and not rated and your spo eparate sheet to th | filing j ouse is | ointly, and y not filing w | your : vith y | I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write |
| 1. | Fill in your employ | yment | | | | | | |
| | information. If you have more the | nan one | | Debtor 1 | | | | Debtor 2 or non-filing spouse |
| | job, attach a separa | | Employment status | ☐ Employed | مما | | | Employed |
| | additional employe | | Occupation | ✓ Not employ Disabled | ea | | | ☐ Not employed |
| | Include part-time, s | seasonal. | Occupation | Disabled | | | | |
| | or self-employed w | | Employer's name | - | | | | _ |
| | Occupation may in | clude | Employer's address | | | | | |
| | student or homema applies. | aker, if it | , ,,, | Number Street | | | | Number Street |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | City | | State Zip Co | ode | City State Zip Code |
| | | | How long employed | here? | | | | |
| | Oire D | -1-!!- 41- | | | | | | |
| | | | out Monthly Incom | | | | | |
| | timate monthly inco n-filing spouse unless | | | m. If you have noth | ning to I | report for an | y line | , write \$0 in the space. Include your |
| If y | ou or your non-filing | spouse have | | ver, combine the inf | ormatic | on for all emp | ploye | rs for that person on the lines below. If |
| | | | | | , | For Debtor | 1 | For Debtor 2 or non-filing spouse |
| 2. | | | alary, and commission monthly, calculate wha | | 2. | \$0 | 0.00 | |
| 3. | Estimate and list | monthly ove | ertime pay. | | 3. + | \$0 | 0.00 | |
| 4. | Calculate gross in | ncome. Add | d line 2 + line 3. | | 4. | \$0 | 0.00 | |

Official Form 106l Schedule I: Your Income page 1

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| Deb | ו וטו | Austin Joshua Williams | | Case nur | nbe | r (if kn | own) | | |
|-----|-------|--|--------------|------------------------|-----|----------|-------------------------|----------|------------------------|
| | | | | For Debtor 1 | | | btor 2 or ing spouse |) | |
| | Cop | by line 4 here | 4. | \$0.00 | _ | | | _ | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | | | | | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$0.00 | | | | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$0.00 | | | | | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$0.00 | | | | | |
| | 5e. | Insurance | 5e. | \$0.00 | | | | | |
| | 5f. | Domestic support obligations | 5f. | \$0.00 | | | | | |
| | 5g. | Union dues | 5g. | \$0.00 | | | | | |
| | 5h. | Other deductions. Specify: | 5h. - | \$0.00 | | | | | |
| 6. | | I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h. | 6. | \$0.00 | | | | | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | | | | | |
| 8. | List | all other income regularly received: | | | | | | | |
| | 8a. | Net income from rental property and from operating a business, profession, or farm | 8a. | \$0.00 | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | | | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | | | | |
| | 8e. | Social Security | 8e. | \$0.00 | | | | | |
| | 8f. | Other government assistance that you regularly receive | | | | | | | |
| | | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | |
| | | Specify: | 8f. | \$0.00 | | | | | |
| | 8g. | Pension or retirement income | - 8g. | \$0.00 | | | | | |
| | 8h. | Other monthly income. | | | | | | | |
| | | Specify: Long Term Disability | 8h. | + <u>\$1,966.00</u> | | | | | |
| 9. | Add | d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$1,966.00 | | | | | |
| 10. | Calo | culate monthly income. Add line 7 + line 9. | 10. | \$1,966.00 | + | | |]_[| \$1,966.00 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | . r | | |]_[| |
| 11. | Inclu | te all other regular contributions to the expenses that you list in S ude contributions from an unmarried partner, members of your househ nds or relatives. | nold, y | our dependents, you | | | · | | ulo I |
| | ו טם | not include any amounts already included in lines 2-10 or amounts tha | ıı are i | iot available to pay (| ;xp | enses | iistea in Sc | nea | uie J. |
| | Spe | cify: | | | | | 11. | + | \$0.00 |
| 12. | inco | If the amount in the last column of line 10 to the amount in line 11. John Mrite that amount on the Summary of Your Assets and Liabilities applies. | | | | | | | \$1,966.00 Combined |
| 12 | | you expect an increase or decrease within the year after you file t | hie fo | rm? | | | | ı | monthly income |
| | ₩. | No. None. | 10 | •••• | | | | | |
| | | Yes. Explain: | | | | | | | |
| | | | | | | | | | |

Official Form 106l Schedule I: Your Income page 2

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| F | ill in this inform | nation to identify | y your case: | | | Cha | ck if this | io | |
|-------------|---|--|---|-------------------|---|---------------------|-------------------------------|-------------------------------|--------------|
| | Debtor 1 | Austin First Name | Joshua Middle Name | Willia Last Na | | | An ame | ended filing ement showing | postpetition |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Na | me | | | · 13 expenses a | |
| | United States Bankr | uptcy Court for the: | EASTERN DIST | TRICT OF I | MISSOURI | | MM / D | D / YYYY | <u> </u> |
| | Case number (if known) | | | | | | IVIIVI / D | D/1111 | |
| Of | fficial Form 10 | 16J | | | | J | | | |
| Sc | chedule J: Yo | — our Expenses | ; | | | | | | 12/15 |
| cor | rect information. If | more space is nee | eded, attach anothorer every question | er sheet to t | ing together, both ar his form. On the top | | | | |
| 1. | Is this a joint cas | e? | | | | | | | |
| 2. | No. Go to lin Yes. Does D No Yes Do you have depo | | s for Separate Housel Dependent's relati Debtor 1 or Debtor | onshi | | 2. Dependent's age | Does dependent live with you? | | |
| | Do not state the de names. | ependents' | | | | | | | - |
| 3. | Do your expense expenses of peop yourself and you | ole other than | ✓ No ☐ Yes | | | | | | □ Tes |
| P | art 2: Estima | ate Your Ongoin | na Monthly Exp | enses | | | | | |
| Est to r | timate your expens | es as of your bankr of a date after the l | uptcy filing date u | nless you a | re using this form as supplemental Sche | | | - | |
| | lude expenses paid th assistance and h | | • | • | | | | Your expens | ses |
| 4. | The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. | | | | | | 2 | 1 | \$325.00 |
| | If not included in | line 4: | | | | | | | |
| | 4a. Real estate ta | axes | | | | | 4 | ła | |
| | 4b. Property, hon | neowner's, or renter's | s insurance | | | | 4 | 1b | |
| | 4c. Home mainte | nance, repair, and u | pkeep expenses | | | | 4 | łc | |
| | 4d Homeowner's | association or cond | lominium dues | | | | , | 1d | |

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| Debt | or 1 Austin Joshua Williams | Case number (if known) |
|------|---|------------------------|
| | | Your expenses |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. |
| 6. | Utilities: | |
| | 6a. Electricity, heat, natural gas | 6a. \$250.00 |
| | 6b. Water, sewer, garbage collection | 6b. \$75.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$50.00 |
| | 6d. Other. Specify: | 6d |
| 7. | Food and housekeeping supplies | 7. \$500.00 |
| 8. | Childcare and children's education costs | 8. |
| 9. | Clothing, laundry, and dry cleaning | 9. \$100.00 |
| 10. | Personal care products and services | 10. \$100.00 |
| 11. | Medical and dental expenses | 11. \$100.00 |
| | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. \$100.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$66.00 |
| 14. | Charitable contributions and religious donations | 14. |
| _ | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | |
| | 15a. Life insurance | 15a. |
| | 15b. Health insurance | 15b. |
| | 15c. Vehicle insurance | 15c. |
| | 15d. Other insurance. Specify: | 15d. |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. |
| 17. | Installment or lease payments: | |
| | 17a. Car payments for Vehicle 1 | 17a |
| | 17b. Car payments for Vehicle 2 | 17b |
| | 17c. Other. Specify: | |
| | 17d. Other. Specify: | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. |
| 19. | Other payments you make to support others who do not live with you. Specify: | 19. |

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| Deb | tor 1 | Austin Joshua Williams | Case number (if known) | |
|---|------------|---|------------------------|------------|
| | | real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a | |
| | 20b. | Real estate taxes | 20b | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | |
| | 20e. | Homeowner's association or condominium dues | 20e | |
| 21. | Other | . Specify: | 21 | |
| 22. | Calcu | late your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a | \$1,666.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J | l-2. 22b | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$1,666.00 |
| 23. | Calcu | late your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. <u> </u> | \$1,966.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. _ | \$1,666.00 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | \$300.00 |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after y | you file this form? | |
| For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? | | | | |
| | ☑ N | No | | |
| | □ \ | Yes. Explain here: | | |
| | | None. | | |
| | | | | |

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| | Austin | Joshua | Williams | | |
|---|----------------------|---|---|--|----------------------------------|
| | First Name | Middle Name | Last Name | | |
| ebtor 2 Spouse, if filing | a) First Name | Middle Name | Last Name | | |
| | | or the: FASTERN DIS | STRICT OF MISSOURI | | |
| ase number | aapto, coarrie | <u> </u> | | — •• • • • • • • • • • • • • • • • • • | |
| known) | | | | Check if this amended fili | |
| ficial Forn | n 106Sum | | | | |
| ımmary c | of Your Ass | ets and Liabilit | ies and Certain Statis | stical Information | 12 |
| rect informati edules after y | ion. Fill out all of | f your schedules first; inal forms, you must f | then complete the information | oth are equally responsible for su on this form. If you are filing am ck the box at the top of this page | ended |
| art II. | J | 11 /135013 | | | |
| | | | | | r assets le of what you ov |
| Schedule A/ | B: Property (Offici | al Form 106A/B) | | | |
| 1a. Copy lir | ne 55, Total real e | state, from Schedule A | /B | | \$30,000. |
| 1b. Copy lir | ne 62, Total perso | nal property, from Sche | edule A/B | _ | \$14,500. |
| 1c. Copy lir | ne 63, Total of all | property on Schedule A | /B | | \$44,500. |
| art 2: Su | ummarize You | ır Liabilities | | | |
| | | | | | our liabilities nount you owe |
| | | | Property (Official Form 106D) f claim, at the bottom of the last page | age of Part 1 of Schedule D | \$49,446. |
| | | | s (Official Form 106E/F) | dule E/F | \$0. |
| 2a. Copy th | | in are in (priority arioco. | ared claims) from line 6e of Sched | | |
| 2a. Copy the Schedule E/. 3a. Copy the | ne total claims fron | " , | ured claims) from line 6e of Sched secured claims) from line 6j of Sch | | \$28,933. |
| 2a. Copy the Schedule E/. 3a. Copy the | ne total claims fron | " , | , | | \$28,933.0 \$78,379.0 |
| 2a. Copy the Schedule E/. 3a. Copy the 3b. Copy the | ne total claims fron | " , | secured claims) from line 6j of Sch | hedule E/F+ | |

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$1,666.00

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| Debtor 1 | | Austin Joshua Williams Case number (if known) | | | | |
|----------|--|---|--|--|--|--|
| P | art 4: | Answer These Questions for Administrative and Statist | ical Records | | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | |
| | ☐ No | . You have nothing to report on this part of the form. Check this box and s | submit this form to the court with your other schedules. | | | |
| 7. | What k | ind of debt do you have? | | | | |
| | <u> </u> | our debts are primarily consumer debts. Consumer debts are those "incinity, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stat | | | | |
| | | our debts are not primarily consumer debts. You have nothing to report as form to the court with your other schedules. | on this part of the form. Check this box and submit | | | |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | | | | | |
| 9. | Copy th | ne following special categories of claims from Part 4, line 6 of Schedul | le E/F: | | | |
| | | | Total claim | | | |
| | From P | art 4 on Schedule E/F, copy the following: | | | | |
| | 9a. Do | mestic support obligations. (Copy line 6a.) | \$0.00 | | | |
| | 9b. Ta | xes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | | | |
| | 9c. Cla | aims for death or personal injury while you were intoxicated. (Copy line 6c. | \$0.00 | | | |
| | 9d. St | udent loans. (Copy line 6f.) | \$0.00 | | | |
| | | oligations arising out of a separation agreement or divorce that you did not or ority claims. (Copy line 6g.) | report as \$0.00 | | | |

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

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| | | | | _ |
|---------------------------------|-------------------------------------|------------------------------|--------------------------------|---|
| Fill in this inf | ormation to id | dentify your case: | : | |
| Debtor 1 | Austin First Name | Joshua Middle Name | Williams Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for | the: EASTERN DIS | TRICT OF MISSOURI | |
| Case number (if known) | | | | Check if this is an amended filing |
| Official Form | 106Dec | | | |
| Declaration | About an li | ndividual Debt | or's Schedules | 12/15 |
| \$250,000, or impri | | | 18 U.S.C. §§ 152, 1341, 1519 | bankruptcy case can result in fines up to , and 3571. |
| Did you pay o | or agree to pay s | omeone who is NOT | an attorney to help you fill o | ut bankruptcy forms? |
| ☑ No | | | | |
| Yes. Na | ame of person | | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| Under penalt true and corr | | clare that I have read | the summary and schedules | s filed with this declaration and that they are |
| | n Joshua Willia hua Williams Del | | Signature of Debtor 2 | |

Date 09/05/2019

MM / DD / YYYY

MM / DD / YYYY

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| Elli to data t | nformation to i | identify your case | e: | | |
|--|--|--|--|---|-------|
| Fill in this i | illorillation to | , , , | | | |
| Debtor 1 | Austin | Joshua | Williams | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filin | ng) First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court fo | or the: EASTERN DIS | STRICT OF MISSOURI | | |
| Case number | | | | – | |
| (if known) | | | | Check if this is an amended filing | |
| Official For | m 107 | | | | |
| | | | r i i de Erre de Be | 1 | |
| Statement | of Financia | I Affairs for inc | lividuals Filing for Bar | ikruptcy | 04/19 |
| correct informa | ition. If more spac | | ed people are filing together, bot separate sheet to this form. On | h are equally responsible for supplying the top of any additional pages, write | |
| correct informa your name and | ntion. If more space case number (if k | ce is needed, attach a nown). Answer every | ed people are filing together, bot separate sheet to this form. On | h are equally responsible for supplying the top of any additional pages, write | |
| Part 1: 0 1. What is yo Married | ntion. If more space case number (if keeping and the case number to be case number t | e is needed, attach a nown). Answer every out Your Marital \$ | ed people are filing together, bot separate sheet to this form. On a question. | h are equally responsible for supplying the top of any additional pages, write | |
| correct informa your name and Part 1: Continue to the contin | ntion. If more space case number (if keeping and the case number to be case number t | e is needed, attach a nown). Answer every out Your Marital \$ | ed people are filing together, bot separate sheet to this form. On a question. | h are equally responsible for supplying the top of any additional pages, write | |
| Part 1: 0 1. What is yo | ation. If more space case number (if keeps of the case number (if keeps of | e is needed, attach a nown). Answer every out Your Marital S status? | ed people are filing together, bot separate sheet to this form. On a question. | h are equally responsible for supplying the top of any additional pages, write | |
| Part 1: G 1. What is yo | ation. If more space case number (if keeping particular description) and the control of the cont | ee is needed, attach a nown). Answer every out Your Marital S status? | ed people are filing together, bot separate sheet to this form. On to question. Status and Where You Live | h are equally responsible for supplying the top of any additional pages, write | |
| correct informa your name and Part 1: 1. What is yo | ation. If more space case number (if keeps and the case number (if | ce is needed, attach a nown). Answer every out Your Marital status? Eyou lived anywhere of you lived in the last 3 you ever live with a specific process. | ed people are filing together, bot separate sheet to this form. On a question. Status and Where You Live other than where you live now? years. Do not include where you live ouse or legal equivalent in a com | h are equally responsible for supplying the top of any additional pages, write | |

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| Debtor 1 Austin Joshua Williams Case number (if known) | | | | | | |
|--|--|--|--|--|--|--|
| Part 2: | Explain the Sources of | Your Income | | | | |
| Fill in t | bu have any income from employ the total amount of income you rec- are filing a joint case and you have | eived from all jobs and all bu | sinesses, including par | t-time activities. | lendar years? | |
| | | | | | | |
| | | Debtor 1 | | Debtor 2 | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | |
| | ary 1 of the current year until ou filed for bankruptcy: | ₩ Wages, commissions, bonuses, tips | \$0.00 | Wages, commissions, bonuses, tips | | |
| the date ye | a med for bank uptey. | Operating a business | | Operating a business | | |
| | t calendar year: | Wages, commissions, bonuses, tips | \$20,000.00 | ☐ Wages, commissions, bonuses, tips | | |
| (January 1 | to December 31, 2018) | Operating a business | | Operating a business | | |
| For the cal | endar year before that: | ₩ages, commissions, bonuses, tips | \$50,000.00 | ☐ Wages, commissions, bonuses, tips | | |
| (January 1 | to December 31, 2017) | Operating a business | · • | | | |
| Include unemp | bu receive any other income during income regardless of whether that bloyment; and other public benefit parabling and lottery winnings. If your 1. | at income is taxable. Examp payments; pensions; rental ir | les of other income are ncome; interest; dividen | ds; money collected from la | awsuits; royalties; | |
| List ea | ach source and the gross income fr | om each source separately. | Do not include income | that you listed in line 4. | | |
| ☐ No | o es. Fill in the details. | | | | | |
| | | Debtor 1 | | Debtor 2 | | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | |
| | ary 1 of the current year until ou filed for bankruptcy: | Disability | \$1,900.00 | | | |
| | | | | | | |
| | t calendar year: to December 31, 2018) | | | | | |
| | endar year before that: to December 31, 2017 | | | | | |

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| Debtor 1 | | Austin Joshua Williams | | Case number (if known) |
|----------|-----------------------------------|---|---|--|
| Р | art 3: | l ist Ca | ertain Payments You Made Before You | ı Filed for Bankruntov |
| | | | 1's or Debtor 2's debts primarily consumer de | |
| • | □ No. | Neither | | r debts. Consumer debts are defined in 11 U.S.C. § 101(8) as |
| | | During t | the 90 days before you filed for bankruptcy, did yo | ou pay any creditor a total of \$6,825* or more? |
| | | □ No. | Go to line 7. | |
| | | Yes. | total amount you paid that creditor. Do not inclu | al of \$6,825* or more in one or more payments and the ide payments for domestic support obligations, such as payments to an attorney for this bankruptcy case. |
| | | * Subjec | ct to adjustment on 4/01/22 and every 3 years aft | er that for cases filed on or after the date of adjustment. |
| | √ Yes | . Debtor | 1 or Debtor 2 or both have primarily consume | debts. |
| | | During t | the 90 days before you filed for bankruptcy, did yo | ou pay any creditor a total of \$600 or more? |
| | | ☑ No. | Go to line 7. | |
| | | ☐ Yes. | | al of \$600 or more and the total amount you paid that support obligations, such as child support and alimony. this bankruptcy case. |
| 7. | Insiders corporat agent, ir | include you ions of whi ncluding or | our relatives; any general partners; relatives of an ich you are an officer, director, person in control, | ayment on a debt you owed anyone who was an insider? y general partners; partnerships of which you are a general partner; or owner of 20% or more of their voting securities; and any managing . 11 U.S.C. § 101. Include payments for domestic support obligations |
| | ✓ No ☐ Yes | . List all pa | ayments to an insider. | |
| 8. | benefite | ed an insid | | payments or transfer any property on account of a debt that |
| | ☑ No | • | ayments that benefited an insider. | |
| Р | art 4: | Identif | y Legal Actions, Repossessions, and | Foreclosures |
| 9. | List all s | uch matte | | n any lawsuit, court action, or administrative proceeding? ctions, divorces, collection suits, paternity actions, support or custody |
| | ✓ No □ Yes | . Fill in the | e details. | |

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| Deb | tor 1 | Austin Joshua Williams | Case number (if known) |
|-----|----------------------|---|---|
| 10. | seized, | I year before you filed for bankruptcy, was any of your property repos or levied? Ill that apply and fill in the details below. | sessed, foreclosed, garnished, attached, |
| | بخا | Go to line 11. Fill in the information below. | |
| 11. | | 90 days before you filed for bankruptcy, did any creditor, including a b s from your accounts or refuse to make a payment because you owed | · · · · · · · · · · · · · · · · · · · |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 12. | | l year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official? | possession of an assignee for the benefit of |
| | ✓ No ☐ Yes | | |
| Pa | art 5: | List Certain Gifts and Contributions | |
| 13. | Within 2 | 2 years before you filed for bankruptcy, did you give any gifts with a to | otal value of more than \$600 per person? |
| | ✓ No ☐ Yes | . Fill in the details for each gift. | |
| 14. | Within 2 to any o | 2 years before you filed for bankruptcy, did you give any gifts or contribatity? | ibutions with a total value of more than \$600 |
| | ✓ No ☐ Yes | . Fill in the details for each gift or contribution. | |
| Pa | art 6: | List Certain Losses | |
| 15. | | l year before you filed for bankruptcy or since you filed for bankruptcy saster, or gambling? | , did you lose anything because of theft, fire, |
| | ✓ No ☐ Yes | . Fill in the details. | |

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| Deb | tor 1 | Austin Joshua Williams | Case number (if known) | | | |
|------|-------------|---|---|-------------------|-----------------------|------------|
| Pa | art 7: | List Certain Payments or | Transfers | | | |
| 16. | | - | ptcy, did you or anyone else acting on y nkruptcy or preparing a bankruptcy peti | | or transfer any prop | perty to |
| | Include | any attorneys, bankruptcy petition p | preparers, or credit counseling agencies fo | r services requir | ed for your bankrupto | cy. |
| | □ No | | | | | |
| | | s. Fill in the details. | | | | |
| | | | Description and value of any property | transferred | Date payment | Amount of |
| Jon | nathan E | Brent | \$330 (\$310 filing fee; \$20 credit re | eport fees) | or transfer was | payment |
| Pers | on Who V | Vas Paid | - | | made | |
| Num | iber Str | eet | - | | 9/5/19 | \$330.00 |
| | .50. 01. | | | | | |
| | | | - | | | |
| City | | State ZIP Code | - | | | |
| Oity | | State Zii Souc | | | | |
| Ema | il or websi | te address | - | | | |
| D | \A/I A | And the December & Net Very | _ | | | |
| | | lade the Payment, if Not You | | | | |
| 17. | | - | ptcy, did you or anyone else acting on y vith your creditors or to make payments | | | perty to |
| | Do not | include any payment or transfer that | you listed on line 16. | • | | |
| | ⋈ No | | | | | |
| | ب | s. Fill in the details. | | | | |
| 18. | | · · | uptcy, did you sell, trade, or otherwise t se of your business or financial affairs' | | perty to anyone, otl | ner than |
| | | • | s made as security (such as granting of a shave already listed on this statement. | security interest | or mortgage on your | property). |
| | ✓ No | s. Fill in the details. | | | | |
| 4.5 | | | | | | |
| 19. | | 10 years before you filed for bank a a beneficiary? (These are often | ruptcy, did you transfer any property to called asset-protection devices.) | a self-settled tr | ust or similar devic | e of which |
| | y No | • | | | | |
| | Yes | s. Fill in the details. | | | | |
| | | | | | | |

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| Deb | otor 1 | Austin Joshua Williams | Case number (if known) | | | | |
|-----|---------------------------|--|--|--|--|--|--|
| Р | art 8: | List Certain Financial Accounts, Instruments, Safe Depo | osit Boxes, and Storage Units | | | | |
| 20. | benefit, Include | year before you filed for bankruptcy, were any financial accounts or i closed, sold, moved, or transferred? checking, savings, money market, or other financial accounts; certificates opension funds, cooperatives, associations, and other financial institutions. | | | | | |
| 21. | _ | . Fill in the details. now have, or did you have within 1 year before you filed for bankruptc | y, any safe deposit box or other depository | | | | |
| | for secu | Fill in the details. | | | | | |
| 22. | ✓ No | u stored property in a storage unit or place other than your home with Fill in the details. | in 1 year before you filed for bankruptcy? | | | | |
| Р | art 9: | Identify Property You Hold or Control for Someone Else | | | | | |
| 23. | - | hold or control any property that someone else owns? Include any printrust for someone. | operty you borrowed from, are storing for, | | | | |
| | ✓ No ☐ Yes | Fill in the details. | | | | | |
| P | art 10: | Give Details About Environmental Information | | | | | |
| For | the purp | ose of Part 10, the following definitions apply: | | | | | |
| ı | hazardou | nental law means any federal, state, or local statute or regulation conc s or toxic substance, wastes, or material into the air, land, soil, surfac statutes or regulations controlling the cleanup of these substances, w | e water, groundwater, or other medium, | | | | |
| | | ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites. | al law, whether you now own, operate, or | | | | |
| | | s material means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item. | ous waste, hazardous substance, toxic | | | | |
| Rep | ort all no | tices, releases, and proceedings that you know about, regardless of w | rhen they occurred. | | | | |
| 24. | Has any law? | governmental unit notified you that you may be liable or potentially lia | able under or in violation of an environmental | | | | |
| 25. | _ | . Fill in the details. ou notified any governmental unit of any release of hazardous material | ? | | | | |
| | Yes. Fill in the details. | | | | | | |

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| Debtor 1 | | Austin Joshua Williams | | | Case number (if known) |
|---|-----------------------------------|---|---|--------------------------------------|--|
| 26. Have you been a party in any judicial or administrative proceeding under any environmental law? I orders. | | | | | y environmental law? Include settlements and |
| | ☑ No □ Yes | s. Fill in the details. | | | |
| P | art 11: | Give Details About You | Business or | Connections to A | any Business |
| 27. | Within busines | | kruptcy, did you | own a business or ha | eve any of the following connections to any |
| | | A sole proprietor or self-employed A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the v | executive of a co | imited liability partnerslorporation | hip (LLP) |
| | | None of the above applies. Go s. Check all that apply above and | | pelow for each business | s. |
| 28. | | 2 years before you filed for ban ncial institutions, creditors, or o | | give a financial stater | ment to anyone about your business? Include |
| | □ No □ Yes | s. Fill in the details below. | | | |
| P | art 12: | Sign Below | | | |
| tha pro or l | t answer operty by both. 18 | s are true and correct. I unders fraud in connection with a banl U.S.C. §§ 152, 1341, 1519, and 3 | tand that making cruptcy case can 1571. | g a false statement, co | nts, and I declare under penalty of perjury oncealing property, or obtaining money or \$250,000, or imprisonment for up to 20 years, |
| | | in Joshua Williams shua Williams, Debtor 1 | X Sig | nature of Debtor 2 | |
| | Date | 09/05/2019 | Da | te | |
| Did | l you atta | ch additional pages to Your Sta | tement of Financ | cial Affairs for Individu | uals Filing for Bankruptcy (Official Form 107)? |
| | No Yes | | | | |
| Did | l you pay | or agree to pay someone who | s not an attorne | y to help you fill out b | ankruptcy forms? |
| | No Yes. Na | me of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

| ın | re Austin Joshua Williams | Case No | · |
|----|--|---------------------------------|-----------------------------------|
| | | Chapter | 13 |
| | DISCLOSURE OF COMPENSATION | N OF ATTORNEY FO | R DEBTOR |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce that compensation paid to me within one year before the filing of services rendered or to be rendered on behalf of the debtor(s) it is as follows: | f the petition in bankruptcy, o | or agreed to be paid to me, for |
| | For legal services, I have agreed to accept | | \$4,800.00 |
| | Prior to the filing of this statement I have received | | \$0.00 |
| | Balance Due | | \$4,800.00 |
| 2. | The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify) | | |
| 3. | The source of compensation to be paid to me is: | | |
| | ☑ Debtor ☐ Other (specify) | | |
| 4. | ☑ I have not agreed to share the above-disclosed compensate associates of my law firm. | tion with any other person un | lless they are members and |
| | ☐ I have agreed to share the above-disclosed compensation associates of my law firm. A copy of the agreement, togeth compensation, is attached. | | |
| 5. | In return for the above-disclosed fee, I have agreed to render le | gal service for all aspects of | the bankruptcy case, including: |
| | a. Analysis of the debtor's financial situation, and rendering adv bankruptcy; | vice to the debtor in determin | ing whether to file a petition in |
| | b. Preparation and filing of any petition, schedules, statements | of affairs and plan which ma | y be required; |
| | c. Representation of the debtor at the meeting of creditors and | confirmation hearing, and ar | ny adjourned hearings thereof; |

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: Adversary Proceedings; Appeals

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

09/05/2019 /s/ Jonathan Brent

Date Jonathan Brent

Jonathan Brent Attorney at Law 462 N Taylor

Suite 105 St. Louis, MO 63108

Phone: (314) 200-5346 / Fax: (314) 735-4046

Bar No. 59169MO

/s/ Austin Joshua Williams

Austin Joshua Williams

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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

IN RE: Austin Joshua Williams CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

| | The above named Debtor hereby verifies that the | attached | ist of creditors is true and correct to the best of his/her |
|--------|---|-----------|---|
| knowl | edge. | | |
| | | | |
| | | | |
| D-1- | 9/5/2019 | 0: | /s/ Austin Joshua Williams |
| Date . | 0/3/2310 | Signature | Austin Joshua Williams |
| | | | |
| | | | |

ChexSystems Attn: Consumer Relations 7805 Hudson Road, Ste 100 Woodbury, MN 55125

Dpt of Education PO Box 16448 St Paul, MN 55116

Equifax P.O. Box 740241 Atlanta, GA 30374

Experian P.O. Box 4500 Allen, TX 75013

HOMEPOINT Financial

HOMEPOINT Financial 11511 Luna Road Ste 200 Dallas, TX 75234

Internal Revenue Service PO Box 7346 Philedelphia PA 19101-7346

Metropolitan Sewer District 2350 Market Street Saint Louis, MO 63103

Missouri Department of Revenue Bankruptcy Unit PO Box 475 301 W High St Jefferson City, MO 65105 Navy Federal Credit Union PO Box 3000 Merrifield, VA 22119

Receivable Management 240 Emery St Bethlehem, PA 18015

Telecheck
Attention: Bankruptcy Department
P.O. Box 4451
Houston, TX 77210

Transunion P.O. Box 1000 Chester, PA 19022

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| F | ill in this inf | ormation to iden | tify your case: | | | Check as | directed in lines | 17 and 21: |
|-----|---|---|---|--|-----------------------------------|---|--|-------------------------------------|
| De | ebtor 1 | Austin First Name | Joshua Middle Name | Williams Last Name | | According to Statement: | the calculations requi | red by this |
| | ebtor 2 Spouse, if filing) | First Name | Middle Name | Last Name | | | ble income is not dete 1 U.S.C. § 1325(b)(3). | |
| | | nkruptcy Court for the: | | | RI | | ble income is determi 1 U.S.C. § 1325(b)(3). | |
| C | ase number | | | | | 3. The com | nmitment period is 3 y | ears. |
| | known) | | | _ | | — | nmitment period is 5 y | |
| Of | ficial Form | 122C-1 | | | | ☐ Check if th | nis is an amended filir | ng |
| an | d Calcula | Statement of Y | tment Perio | od | | ath are assuable | ible for being | 12/1 |
| acc | eurate. If more primation applie | space is needed, attes. On the top of any culate Your Aver | ach a separate sh additional pages age Monthly II | eet to this form. Inc , write your name ar | lude the | line number to v | which the additional | |
| 1. | What is your | marital and filing sta | tus? Check one or | nly. | | | | |
| | ✓ Not marr | ied. Fill out Column A | A, lines 2-11. | | | | | |
| | ☐ Married. | Fill out both Columns | A and B, lines 2-1 | 11. | | | | |
| | bankruptcy c August 31. If in the result. I | rage monthly income ase. 11 U.S.C. § 101 the amount of your mo Do not include any inc mat property in one col | (10A). For examp onthly income varie ome amount more | le, if you are filing on ed during the 6 month than once. For exam | Septembers, add the hole, if both | er 15, the 6-mont income for all 6 th spouses own the | h period would be Ma months and divide th he same rental prope | rch 1 through e total by 6. Fill |
| | | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 2. | - | ages, salary, tips, bo | onuses, overtime, | and commissions | | \$0.00 | | |
| 3. | Alimony and | maintenance payme | nts. Do not includ | e payments from a sp | ouse. | \$0.00 | | |
| 4. | All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3. | | | | | \$0.00 | | |
| 5. | Net income fr | om operating a busi | ness, profession, | or farm | | | | |
| | | | Debtor 1 | Debtor 2 | | | | |
| | Gross receipts deductions) | s (before all | \$0.00 | | | | | |
| | Ordinary and rexpenses | necessary operating | \$0.00 | | Сору | | | |
| | Net monthly in profession, or | come from a business farm | \$ 0.00 | | here → | \$0.00 | | |

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| Deb | tor 1 | Austin Joshua Williams | | | | Case number (if I | known) | |
|-----|-----------------------|--|---|---|----------------|-------------------|---|------------------------------|
| | | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 6. | Net | income from rental and other r | eal property | | | | | |
| | | | Debtor 1 | Debtor 2 | | | | |
| | | ss receipts (before all | \$0.00 | | | | | |
| | Ordi | nary and necessary operating - | \$0.00 | | | | | |
| | Net | monthly income from rental or real property | \$0.00 | | Copy here → | \$0.00 | | |
| 7. | Inte | rest, dividends, and royalties | | | | \$0.00 | | |
| 8. | Une | mployment compensation | | | | \$0.00 | | |
| | | oot enter the amount if you conte efit under the Social Security Act | | | | | | |
| | F | or you | | \$0.0 | 00 | | | |
| | F | or your spouse | | | | | | |
| 9. | | sion or retirement income. Do a benefit under the Social Secu | , | ount received that | | \$0.00 | | |
| 10. | amo or pa or in | ume from all other sources not unt. Do not include any benefits ayments received as a victim of ternational or domestic terrorism arate page and put the total below | received under the a war crime, a crime a. If necessary, list o | Social Security A against humanity | ct ′, | | | |
| | Lon | g Term Disability | | | | \$327.67 | | |
| | | I amounts from separate pages, | if any | | | | | |
| 11. | | culate your total average montl | • | | • | | 1 - | |
| | | lines 2 through 10 for each colun add the total for Column A to the | | В. | | \$327.67 |]+[: | Total average monthly income |
| P | art 2 | Determine How to M | easure Your De | eductions fron | n Incom | e | | , |
| | | y your total average monthly in | ncome from line 11 | 1_ | | | | \$327.67 |
| 13. | | culate the marital adjustment. | | | | | | |
| | V | You are not married. Fill in 0 be | | | | | | |
| | | You are married and your spous | | Fill in 0 below. | | | | |
| | | You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for exceeding the processary, list additional adjust | se is not filing with y listed in line 11, Co n as payment of the | ou. Solumn B, that was I spouse's tax liabil and the amount of | lity or the s | spouse's support | of someone other | |
| | | If this adjustment does not appl | y, enter 0 below. | | | | | |
| | | | | | | | | |
| | | | | + | | \$0.00 Cor | oy here → | _ \$0.00 |
| | | | | | | | - | #207.07 |
| 14. | You | r current monthly income. Sul | btract the total in line | e 13 from line 12. | | | | \$327.67 |

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| Deb | otor 1 | Austin Joshua Williams Case number (if known) | |
|-----|--------|---|-------------|
| 15. | Calcu | ulate your current monthly income for the year. Follow these steps: | |
| | 15a. | Copy line 14 here 😝 | \$327.67 |
| | | Multiply line 15a by 12 (the number of months in a year). | X 12 |
| | 15b. | The result is your current monthly income for the year for this part of the form. | \$3,932.04 |
| 16. | Calcu | ulate the median family income that applies to you. Follow these steps: | |
| | 16a. | Fill in the state in which you live. Missouri | |
| | 16b. | Fill in the number of people in your household. | |
| | 16c. | Fill in the median family income for your state and size of household | \$48,276.00 |
| 17. | How | do the lines compare? | |
| | 17a. | Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable incomunder 11 U.S.C.</i> § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official | |
| | 17b. | Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is detern</i> 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 1 On line 39 of that form, copy your current monthly income from line 14 above. | |
| Р | art 3: | Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) | |
| | | | \$327.67 |
| | | your total average monthly income from line 11. | Ψ321.01 |
| 19. | that c | ct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend alculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's ne, copy the amount from line 13. | |
| | 19a. | If the marital adjustment does not apply, fill in 0 on line 19a. | \$0.00 |
| | 19b. | Subtract line 19a from line 18. | \$327.67 |
| 20. | Calcu | ulate your current monthly income for the year. Follow these steps: | |
| | 20a. | Copy line 19b | \$327.67 |
| | | Multiply by 12 (the number of months in a year). | X 12 |
| | 20b. | The result is your current monthly income for the year for this part of the form. | \$3,932.04 |
| | 20c. | Copy the median family income for your state and size of household from line 16c. | \$48,276.00 |
| 21. | How | do the lines compare? | |
| | ب | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The commitment period is 3 years</i> . Go to Part 4. | |
| | _ | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4. | |

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| Debtor 1 | Austin Joshua Williams | Case number (if known) |
|----------|--|---|
| Part 4: | Sign Below | |
| By sig | ning here, under penalty of perjury I declare that t | the information on this statement and in any attachments is true and correct. |
| χ /s/ | Austin Joshua Williams | X |
| Au | stin Joshua Williams, Debtor 1 | Signature of Debtor 2 |
| Da | te 9/5/2019 | Date |
| | MM / DD / YYYY | MM / DD / YYYY |

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Current Monthly Income Calculation Details

13

In re: **Austin Joshua Williams**Case Number:
Chapter:

10. Income from all other sources not listed above.

| Debtor or Spouse's Income | Description (if available) | | | | | | | |
|---------------------------|----------------------------|--------------------|--------------------|--------------------|--------------------|---------------|----------------------|--|
| | 6 Months Ago | 5 Months Ago | 4 Months Ago | 3 Months Ago | 2 Months Ago | Last Month | Avg. Per Month | |

 Debtor
 Long Term Disability

 \$0.00
 \$0.00
 \$0.00
 \$0.00
 \$1,966.00
 \$327.67